

DURHAM COUNTY
BOARD OF ELECTIONS



NOTICE OF CANDIDACY
FOR LEGISLATIVE &
LOCAL OFFICES
2004

TO THE DURHAM COUNTY BOARD OF ELECTIONS:

I hereby file notice as a candidate for nomination as School Board
(Name of Office)

District A in the N/A Party Primary Election scheduled for July 20, 2004*.
(Name of Political Party)

I affiliate with the N/A Party, and I certify that I am now registered on the
registration records of the precinct in which I reside as an affiliate of the N/A Party.

I further certify that I have not changed my political party affiliation within the past ninety (90) days, nor
have I changed from "unaffiliated" status to my current affiliation within the past ninety (90) days.

I pledge that if I am defeated in the primary, I will not run for any office as a write-in candidate in the next
general election.

#1 Ontario Ct
Residence Address

Wendham, N.C. 27713
City, State, Zip

#1 Ontario Ct
Mailing Address

Wendham, N.C. 27713
City, State, Zip

Anne Murphy
Name as it will appear on Ballot

Anne W. Murphy
Signature of Candidate

484-7522
Home Telephone Work Telephone

durhamtolks@aearthlink.net
Email Address

Certification of Notice of Candidacy

I hereby certify that Anne Murphy, the candidate who signed above, personally appeared
(Name as it will appear on Ballot)
before me this day and signed his/her signature to the above Notice of Candidacy or acknowledged his/her
signature to be the same.

This 2nd day of May, 2004.

[Signature]
Signature of Certifying Officer

[Signature]
Title of Certifying Officer

My commission expires: May 31, 2006

Verification by County Board

The undersigned has examined the voter registration records in Durham County and found
Anne Murphy to be a registered voter, affiliated with the N/A Party and
that subject candidate has not changed his/her political party affiliation within the past ninety (90) days.

Durham
County

May 7, 2004
Date

[Signature]
Chairman or Director

Statement of Organization - Candidate Committee

Amendment

☐ Yes ☒ No

1. Committee Information		c. ID Number	
a. Full Name <i>Anne Murphy for School Board</i>			
b. Mailing Address (include City, State, and Zip Code) <i>#1 Ontario Ct. Wendham, N.C. 27713</i>		d. Date Organized <i>5/7/04</i>	
		e. Phone Number <i>484-7522</i>	
<input type="checkbox"/> Candidate's Primary Committee			
2. Candidate Information		d. Party Affiliation	
a. Full Name <i>Anne Murphy</i>		<i>N/A</i>	
b. Mailing Address (include City, State, and Zip Code) <i>#1 Ontario Ct. Wendham, N.C. 27713</i>		e. Office Sought <i>School Board</i>	
		f. Jurisdiction <i>A</i>	
		(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)	
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name <i>Michelle Alexander</i>		a. Full Name	
b. Mailing Address (include City, State, and Zip Code) <i>#3 Chelan Ct.</i>		b. Mailing Address (include City, State, and Zip Code)	
c. Phone Number <i>361-3594</i>	d. Email Address <i>m.alexander@earthlink.net</i>	c. Phone Number	d. Email Address
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name <i>State Employees Credit Union</i>	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose <i>Campaign finance</i>	
c. Phone Number	d. Email Address	c. Code	d. Type <i>Checking</i>
CERTIFICATION			
I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct.			
<i>Anne Murphy</i> Printed Name of Signer		<i>Anne Murphy</i> Signature of Appointed Treasurer	
		<i>5/7/04</i> Date	

CRO-2100A

NC State Board of Elections

May 2003



North Carolina
State Board of Elections

506 N Harrington Street
Raleigh, NC 27603

Kimberly Westbrook
Deputy Director – Campaign Reporting

Mailing Address
PO Box 27255
Raleigh, NC 27611-7255
(919) 733-7173
Fax: (919) 715-8047

Certification of Treasurer

FILED BY:

Candidate Name:

Anne Murphy

Treasurer Name:

Michelle Alexander

Treasurer Address:

3 Clinton Ct

(include city, state, & zip)

Durham NC 27713

361 - 3591

Treasurer Phone:

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy.

5/7/04
Date Signed

Anne W. Murphy
Signature of Candidate



North Carolina
State Board of Elections

506 N Harrington Street
Raleigh, NC 27603

Kimberly Westbrook
Deputy Director - Campaign Reporting

Mailing Address
PO Box 27255
Raleigh, NC 27611-7255
(919) 733-7173
Fax: (919) 715-8047

Certification of Threshold

FILED BY:

Committee Name:

Anne Murphy for School Board

Treasurer Name:

Michelle Thompson

Treasurer Address:

#3 Chelsea Ct

(include city, state, & zip)

Wilmington, N.C.

27213

Treasurer Phone:

361-3594

Check One:

☒ I certify that this committee intends to neither receive nor expend more than \$3,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$3,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports.

☐ I am withdrawing my Certification to remain under the \$3000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required.

5/7/04
Date Signed

Anne H. Murphy
Signature

Disclosure Report Cover

Amendment

☐ Yes

☐ No

Please note that this cover sheet cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.
You must amend the Statement of Organization (CRO-2100A-E) to make those kinds of committee changes.
Use the Addendum form (CRO-1010) if more entries are needed.

1. Committee Information		c. ID Number
a. Full Name <u>Anne Murphy for School Board</u>		<u>5/7/04</u>
b. Mailing Address (include City, State and Zip Code) <u>#1 Entance Ct</u> <u>Kenham, N.C. 27713</u>		d. Date Filed <u>5/7/04</u>
		e. Phone Number <u>454-7522</u>

2. Report Year <u>2004</u>	3. Period Start Date (mm/dd/yyyy) <u>5/7/04</u>	4. Period End Date (mm/dd/yyyy) <u>5/7/04</u>	5. Treasurer Full Name <u>Michelle Alexander</u>
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6. Type of Committee (Check one)		8. Type of Report (check only one type of report from one category)		9. Special Report Name	
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> State/County	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input checked="" type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Referendum		<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> First Plus	<input type="checkbox"/> Final	<input type="checkbox"/> Final
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Soft Money Account		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Third Plus	<input type="checkbox"/> Annual	<input type="checkbox"/> Annual
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special	<input type="checkbox"/> Special
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Semi-annual		
<input type="checkbox"/> NC Political Party Financing Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Mid Year		
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Year End	<input type="checkbox"/> Year End		
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Final	<input type="checkbox"/> Final		
<input type="checkbox"/> Other:		<input type="checkbox"/> Special	<input type="checkbox"/> Special		

10. Account Information		10. Account Information	
a. Financial Institution Full Name <u>SECU</u>		a. Financial Institution Full Name	
b. Purpose <u>Campaign finance</u>	c. Code	b. Purpose	c. Code
	d. Period Begin Balance <u>\$ 0</u>		d. Period Begin Balance <u>\$</u>

CERTIFICATION

I certify that the Committee is in compliance with all provisions of Article 22A, including that no funds are commingled with funds for a federal or out-of-state PAC. I further say that this report is complete, true and correct.

Anne Murphy Printed Name of Signer
Michelle B Alexander Signature of Appointed Treasurer
5-7-04 Date

FOR OFFICE USE ONLY

Date Received: May 7, 2004
Date Postmarked: _____
Date Scanned: May 7, 2004

Employee: [Signature]
Employee: [Signature]
Employee: [Signature]

Delivery Method

☐ Normal Mail
☐ Registered Mail
☒ Hand Delivered
☐ Electronically Filed

Detailed Summary

Amendment

☐ Yes☒ No

1. Committee Full Name (and Fund if applicable)		2. Type of Report	3. ID Number
Anne Murphy for School Board Organization			
Start of Election Cycle: January 1, 2004	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start	\$ 0	\$	
RECEIPTS			
5) Aggregated Contributions from Individuals (CRO-1205)	\$	\$	
6) Contributions from Individuals (CRO-1210)	\$ 125.00	\$	
7) Contributions from Political Party Committees (CRO-1220)	\$	\$	
8) Contributions from Other Political Committees (CRO-1230)	\$	\$	
9) Loan Proceeds (CRO-1410)	\$	\$	
10) Refunds/Reimbursements To the Committee (CRO-1240)	\$	\$	
11) Other Receipt Sources (CRO-1250)	\$	\$	
11a) Interest on Bank Accounts (CRO-1250)	\$	\$	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)	\$	\$	
11c) Outside Sources of Income (CRO-1250)	\$	\$	
12) "Goods and Services" Contributions (CRO-1260)	\$	\$	
13) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, and 12)	\$	\$	
EXPENDITURES			
14) Disbursements (CRO-1310)	\$	\$	
14a) Operating Expenditures (CRO-1310)	\$ 25.00	\$	
14b) Contributions to Candidates/Political Committees (CRO-1310)	\$	\$	
14c) Coordinated Party Expenditures (CRO-1310)	\$	\$	
15) Loan Repayments (CRO-1420)	\$	\$	
16) Refunds/Reimbursements From the Committee (CRO-1320)	\$	\$	
17) In-Kind Contributions (CRO-1510)	\$	\$	
18) TOTAL EXPENDITURES (Add lines 14a, 14b, 14c, 15, 16, and 17)	\$	\$	
19) Cash on Hand at End (Add lines 4 and 13 together, then subtract line 18)	\$ 0	\$	
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)	\$	\$	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$	\$	
22) Debts and Obligations owed By the Committee (CRO-1610)	\$	\$	
23) Debts and Obligations owed To the Committee (CRO-1620)	\$	\$	
24) Account Transfers Within the Committee (CRO-1720)	\$	\$	
25) Administrative Support (CRO-1710)	\$	\$	
26) Forgiven Loans (CRO-1440)	\$	\$	
27) 48-Hour Notice Reports Sum	\$	\$	

Contributions from Individuals

Pg _____ of _____

Amendment

☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)						2. ID Number	
<i>Anne Murphy for School Board</i>							
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
a. Full Name, Mailing Address & Phone (include city, state, & zip) <i>Anne W. Murphy</i> <i>#1 Centane Ct.</i> <i>Richmond, N.C. 27713</i>				b. Job Title/Profession		d. Comments e. Election Cycle Sum to Date <i>\$ 25.00</i>	
				c. Employer's Name/Specific Field			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
				b. Job Title/Profession		d. Comments e. Election Cycle Sum to Date \$	
				c. Employer's Name/Specific Field			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove							
				b. Job Title/Profession		d. Comments e. Election Cycle Sum to Date \$	
				c. Employer's Name/Specific Field			
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		
4. Total only this Page						\$	
5. Total of ALL CRO-1210 Pages						\$ 25.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

Disbursements

Pg ____ of ____

Amendment

☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)				2. ID Number	
<i>Anne Murphy for School Board</i>					
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
<i>Durham Co. Board of Education</i> <i>706 W. Corporation St</i> <i>Durham, N.C. 27701</i>		c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date	
				\$ <i>25.00</i>	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date	
				\$	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name		d. Comments	
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Cycle Sum to Date	
				\$	
f. Account Code	g. Form of Payment	h. Purpose	i. Date (mm/dd/yyyy)	j. Amount	
				\$	
				\$	
5. Total only this Page				\$	
6. Total of ALL CRO-1310 Pages				\$ <i>25.00</i>	
<i>(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					

CRO-1310

NC State Board of Elections

March 2003